	UNIFORM HAZARDOUS CAXO00224519 poc	anilest ment No	2 Page	1 Informa	ion in th	ie studed arese id by Federal	
	Generator's Name and Mailing Address			0:5/25/2/5/2/5/2/5/2/5/2/5/2/5/2/5/2/5/2/			
	Integrated Networks 3183 Redhill, Costa Mesa, CA 92626 4. Generator's Phone (774)641-9250, ext. 241 #403			E BUTO GENERALIS DE CANONICATOR COMO COMO COMO COMO COMO COMO COMO CO			
$\ $	Transporter 1 Company Name 6. US:EPA ID Number						
	mega Recovery Services CADO42245001 Transporter 2 Company Name 8. US EPA ID Number			E State Transporter's ID			
				G.State Facility's ID			
	Omega Recovery Services			CAD042245001 HiFeollin's Phone 2137698-0991			
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number	12.Cont	Type	13. Total Quantity	14. Unit Wt∕Vol	ww	
BNER	*Waste ORM-A N.O.S. ORM-A NA 1693 (5120 Solution)	003	DΜ	165	G	211	
ATOR	Hazardous Waste Liquid NOS ORM-E NA 9189 (Fluorosolv TMS)	002.	DΜ	110	G	211	
	Empty Plastic Drums	300	DΜ	. ø	6		
	Empty Metal Drums	002	DM	dling Codes fo	G	Hateral Bowe	
	A SECULAR STATES AND SECULAR STATES OF THE S	THAVE	3 T 7 7 7 7 7 7				
1	15. Special Handling Instructions and Additional Information						
+	LABELS ARE NEEDED.						
	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. Date Printed/Typed Name Signsture Month Day Year						
4	CALVIN L. BOOKOR Carrie of Beller					040106	
TR	District Grand Name Signature 1 1 / Month Day Yo						
RAZS	Printed/Typed Name LSAC Woods Jr Signature Wood					104101199	
PORT	18. Transporter 2 Acknowledgement or Receipt of Materials					Date Month Day Year	
E							
FACI	19. Discrepancy Indication Space						
1	20. Facility Owner or Operator: Certification of receipt of hazardous materials obvered by this manifest except as noted in ltem 19.						
	Printed/Typed Name Signature	. 1		Min		Month Day Year	
	STEVEN SIMPSON TILL	ede	My	1000		070000	